

**Alabama Medicaid Agency
Pharmacy and Therapeutics Committee**

**Date of Meeting: Wednesday, November 8, 2006
Preferred Drug List Final**

Date Posted: 11/22/06

AHFS Drug Class Reviews: ANTIEMETICS

Subclasses Reviewed

- Antihistamine Antiemetics - Single Entity Agents
- Antiemetics, 5-HT₃ Receptor Antagonists - Single Entity Agents
- Miscellaneous Antiemetics - Single Entity Agents

AHFS Drug Class Re-reviewed: ANTICHOLINERGIC AGENTS

Subclass Reviewed

- Inhaled Antimuscarinics - Single Entity Agents

AHFS Drug Class Re-reviewed: SYMPATHOMIMETIC (ADRENERGIC) AGONISTS

Subclasses Reviewed

- Respiratory β -Adrenergic Agonists - Single Entity Agents
- Respiratory β -Adrenergic Agonists - Combination Products

AHFS Drug Class Re-reviewed: RESPIRATORY TRACT ANTI-INFLAMMATORY AGENTS

Subclasses Reviewed

- Leukotriene Modifiers - Single Entity Agents
- Inhaled Mast-cell Stabilizers - Single Entity Agents

AHFS Drug Class Re-reviewed: ADRENALS

Subclasses Reviewed

- Orally Inhaled Corticosteroids - Single Entity Agents
- Orally Inhaled Corticosteroids - Combination Products

AHFS Drug Class Re-reviewed: SMOOTH MUSCLE RELAXANTS

Subclasses Reviewed

- Respiratory Smooth Muscle Relaxants - Single Entity Agents
- Respiratory Smooth Muscle Relaxants - Combination

AHFS Drug Class Re-reviewed: RESPIRATORY TRACT ANTI-INFLAMMATORY AGENTS

Subclass Reviewed

- Intranasal Corticosteroids - Single Entity Agents

AHFS Drug Class Re-reviewed: ANTIULCER AGENTS AND ACID SUPPRESSANTS

Subclasses Reviewed

Proton-pump Inhibitors - Single Entity Agents

Proton-pump Inhibitors - Combination

AHFS Drug Class Re-reviewed: ANTIDIABETIC AGENTS

Subclass Reviewed

Miscellaneous Antidiabetic Agents - Single Entity Agents

AHFS New Drug Review: INSULINS

Apidra[®]

AHFS New Drug Review: CARDIAC DRUGS, MISCELLANEOUS

Ranexa[®]

Antihistamine Antiemetics- Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Antihistamine Antiemetics- Single Entity Agents	All covered products	NONE	ANTIVERT* TIGAN* UNIVERT*

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Antiemetics, 5-HT₃ Receptor Antagonists - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

**Antiemetics, 5-HT₃
Receptor Antagonists -
Single Entity Agents**

All covered products NONE

ALOXI
ANZEMET
KYTRIL
ZOFTRAN
ZOFTRAN ODT

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Miscellaneous Antiemetics - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

**Miscellaneous
Antiemetics -
Single Entity Agents**

All covered products NONE

CESAMET**
EMEND
MARINOL
SCOPACE*
TRANSDERM-SCOP

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

**May be reviewed at a
future date when eligible

Inhaled Antimuscarinics - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Inhaled Antimuscarinics - Single Entity Agents	All covered products	ATROVENT HFA SPIRIVA	NONE

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Respiratory β -Adrenergic Agonists - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON- PREFERRED BRAND</u>
Respiratory β -Adrenergic Agonists - Single Entity Agents	All covered products	ALUPENT* BRETHINE* FORADIL MAXAIR AUTOHALER PROAIR HFA PROVENTIL HFA SEREVENT DISKUS VENTOLIN HFA XOPENEX HFA	ACCUNEB* ISUPREL* PROVENTIL* XOPENEX

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Respiratory β -Adrenergic Agonists - Combination Products

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

**Respiratory
 β -Adrenergic Agonists -
Combination Products**

All covered products COMBIVENT

DUONEB

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Leukotriene Modifiers - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Leukotriene Modifiers - Single Entity Agents			
-------------------------------------------------------------	--	--	--

All covered products	ACCOLATE SINGULAIR	
----------------------	-----------------------	--

		ZYFLO
--	--	-------

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Inhaled Mast-cell Stabilizers - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Inhaled Mast-cell Stabilizers - Single Entity Agents	All covered products	NONE	INTAL* TILADE

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Orally Inhaled Corticosteroids - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Orally Inhaled Corticosteroids - Single Entity Agents	All covered products	AEROBID AEROBID-M ASMANEX AZMACORT FLOVENT HFA QVAR	PULMICORT

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Orally Inhaled Corticosteroids - Combination Products

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Orally Inhaled Corticosteroids - Combination Products

All covered products	ADVAIR DISKUS ADVAIR HFA	NONE
----------------------	-----------------------------	------

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Respiratory Smooth Muscle Relaxants - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Respiratory Smooth Muscle Relaxants - Single Entity Agents	All covered products NONE		DILOR ELIXOPHYLLIN* LUFYLLIN* LUFYLLIN-400 QUIBRON-T QUIBRON-T/SR* THEO-24 THEOVENT* UNIPHYL

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Respiratory Smooth Muscle Relaxants - Combination Products

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Respiratory Smooth Muscle Relaxants - Combination Products	All covered products	NONE	BRONCOMAR BRONCOMAR GG BRONCOMAR-1 DILEX-G* ELIXOPHYLLIN GG LUFYLLIN-GG* MYCI BRON-G* PANFIL G* QUIBRON QUIBRON-300

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Intranasal Corticosteroids - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Intranasal Corticosteroids - Single Entity Agents			
------------------------------------------------------------------	--	--	--

	All covered products	NASONEX	
--	----------------------	---------	--

			BECONASE AQ FLONASE* NASACORT AQ NASAREL RHINOCORT AQUA
--	--	--	---------------------------------------------------------------------

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Proton-pump Inhibitors - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Proton-pump Inhibitors - Single Entity Agents	All covered products except generic omeprazole	PRILOSEC OTC PROTONIX ZEGERID	ACIPHEX NEXIUM PREVACID PRILOSEC*

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Proton-pump Inhibitors - Combination Products

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Proton-pump Inhibitors - Combination Products			
--------------------------------------------------------------	--	--	--

	All covered products	NONE	
--	----------------------	------	--

			PREVPAC
--	--	--	---------

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Miscellaneous Antidiabetic Agents - Single Entity Agents

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
Miscellaneous Antidiabetic Agents - Single Entity Agents	All covered products NONE		BYETTA JANUVIA** SYMLIN

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

**May be reviewed at a
future date when eligible

Insulins- Apidra

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Insulins	All covered products	SEE CURRENT PDL LISTING	APIDRA
-----------------	----------------------	----------------------------	--------

Apidra

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted

Cardiac Drugs, Miscellaneous- Ranexa

<u>DRUG CLASS</u>	<u>PREFERRED GENERIC/OTC</u>	<u>PREFERRED BRAND</u>	<u>NON-PREFERRED BRAND</u>
-------------------	----------------------------------	----------------------------	--------------------------------

Cardiac Drugs, Miscellaneous

All covered products

SEE CURRENT PDL LISTING

RANEXA

Ranexa

* Denotes generic
available in at least one
dosage form or strength

Drug name denotes all
dosage forms and
strengths unless noted